

3673  
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PTO/SB/21 (08-00)  
Approved for use through 10/31/2002, OMB 0651-0031  
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/912,289	
	Filing Date	7/24/01	
	First Named Inventor	JEFFREY J. NORMAN	
	Group Art Unit	3673	
	Examiner Name	SUNIL SINGH	
Total Number of Pages in This Submission	10	Attorney Docket Number	0102

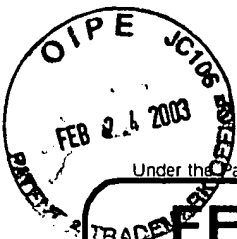
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	H. GORDON SHIELDS
Signature	
Date	2-14-03

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 2-14-03			
Typed or printed name	H. GORDON SHIELDS	Date	2-14-03
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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)**55.00**

## Complete if Known

Application Number	09/912,289
Filing Date	7/24/01
First Named Inventor	JEFFREY J. NORMAN
Examiner Name	SUNIL SINGH
Group Art Unit	3673
Attorney Docket No.	0102

## METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number   
Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	710	201 355	Utility filing fee	<input type="text"/>
106	320	206 160	Design filing fee	<input type="text"/>
107	490	207 245	Plant filing fee	<input type="text"/>
108	710	208 355	Reissue filing fee	<input type="text"/>
114	150	214 75	Provisional filing fee	<input type="text"/>

SUBTOTAL (1) (\$)

### 2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	<input type="text"/> -20** = <input type="text"/> X <input type="text"/>	<input type="text"/>	<input type="text"/>
Independent Claims	<input type="text"/> -3** = <input type="text"/> X <input type="text"/>	<input type="text"/>	<input type="text"/>
Multiple Dependent	<input type="text"/>	<input type="text"/>	<input type="text"/>

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	18	203 9	Claims in excess of 20
102	80	202 40	Independent claims in excess of 3
104	270	204 135	Multiple dependent claim, if not paid
109	80	209 40	** Reissue independent claims over original patent
110	18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65	Surcharge - late filing fee or oath	<input type="text"/>
127	50	227 25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139	130	139 130	Non-English specification	<input type="text"/>
147	2,520	147 2,520	For filing a request for ex parte reexamination	<input type="text"/>
112	920*	112 920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113	1,840*	113 1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115	110	215 55	Extension for reply within first month	<input type="text"/>
116	390	216 195	Extension for reply within second month	<input type="text"/>
117	890	217 445	Extension for reply within third month	<input type="text"/>
118	1,390	218 695	Extension for reply within fourth month	<input type="text"/>
128	1,890	228 945	Extension for reply within fifth month	<input type="text"/>
119	310	219 155	Notice of Appeal	<input type="text"/>
120	310	220 155	Filing a brief in support of an appeal	<input type="text"/>
121	270	221 135	Request for oral hearing	<input type="text"/>
138	1,510	138 1,510	Petition to institute a public use proceeding	<input type="text"/>
140	110	240 55	Petition to revive - unavoidable	<input type="text"/>
141	1,240	241 620	Petition to revive - unintentional	<input type="text"/>
142	1,240	242 620	Utility issue fee (or reissue)	<input type="text"/>
143	440	243 220	Design issue fee	<input type="text"/>
144	600	244 300	Plant issue fee	<input type="text"/>
122	130	122 130	Petitions to the Commissioner	<input type="text"/>
123	50	123 50	Processing fee under 37 CFR 1.17(q)	<input type="text"/>
126	180	126 180	Submission of Information Disclosure Stmt	<input type="text"/>
581	40	581 40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146	710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
149	710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
179	710	279 355	Request for Continued Examination (RCE)	<input type="text"/>
169	900	169 900	Request for expedited examination of a design application	<input type="text"/>

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**55.00**

## SUBMITTED BY

Name (Print/Type)	H. GORDON SHIELDS	Registration No. (Attorney/Agent)	23,099	Telephone	(602) 995-0490
Signature		Date	2-14-03		

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